



# Maricopa County Justice Courts, Arizona

\_\_\_\_\_  
Name of Petitioner/Plaintiff

CASE NUMBER: \_\_\_\_\_

\_\_\_\_\_  
Name of Respondent/Defendant

STATE OF ARIZONA     }  
COUNTY OF MARICOPA } ss

**AFFIDAVIT IN SUPPORT OF  
APPLICATION FOR DEFERRAL OR  
WAIVER OF SERVICE OF  
PROCESS COSTS**

**STATEMENTS MADE TO THE COURT UNDER OATH.** I swear or affirm that the information in this application is true and correct. I make this statement under the penalty of prosecution for perjury if it is determined that I did not tell the truth.

I have requested a deferral or waiver of the following fees in my case:

- ☐ Fees for service of process by a sheriff, marshal, constable, or law enforcement agency: In support of my request, I state that (check and complete any that apply):
- ☐ I have attempted to obtain voluntary acceptance of service of process without success on the person to be served.
- ☐ It would be useless or dangerous for me to try to obtain voluntary acceptance of service by the person to be served because (explain):
- \_\_\_\_\_
- \_\_\_\_\_
- ☐ An enforceable injunction against harassment has been granted to me against the person to be served.
- ☐ Fees for publication: In support of my request, I state that I have attempted to locate the person to be served but I have been unable to locate that person (check and complete any that apply):
- ☐ This is what I did to try to find the other party (explain):
- \_\_\_\_\_
- \_\_\_\_\_
- ☐ I have contacted the person(s) listed below to try to find the location of the other party.

NAME

ADDRESS

_____	_____
_____	_____
_____	_____

**SIGNATURE UNDER PENALTY OF PERJURY**

Today's Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**INFORMATION FOR SERVICE**

You must provide the following information:

To the best of my knowledge, as of (date) \_\_\_\_\_, the last known address of the person to be served was:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_